

SITE DESCRIPTION/EXECUTIVE SUMMARY

Site Name and Location

Dial Trucking
14015 Haggerty Road
Plymouth, Michigan 48170

County: Wayne
Michigan Code Number: 82-T1S-R8E-24CC
DNR District: Detroit
EPA ID Number: MID003782935

SAS Score/Screen No.: 04

The Dial Trucking site is a 26 acre, type II landfill and a solid waste transfer facility located in Plymouth Township. The area is fenced on 3 sides with the west border being the Sly Creek. Since the site opened as a licensed landfill and transfer facility in the 1960's it has accepted mixed municipal and industrial waste (non-ferrous metals) until its closure in 1971 under Act 87.

In June of 1984, Bob Ratz of the Wayne County Health Department visually inspected the site. He found what appeared to be leachate draining into Sly Creek, which flows into the Middle River Rouge. Plymouth Township utilizes a municipal water supply and no wells exist on site. The WCHD is considering sampling, but to date none have been initiated.

Recommendations for EPA

This site receives a low priority for inspection.

Pre-HRS Score: To be determined
Projected HRS Score: To be determined
SI Priority: low/EPA lead

Hours Spent: 1.0 + 8.0 + _____ + _____ + _____ = 9.0
Initial & Date: SC 12-15-87 aug 12-15-87 _____

Date of Previous Summary:
Previous Author:

Current Date: 12/7/87
Author: J. Gatica

Site Assessment Unit
Environmental Response Division
Michigan Dept. of Natural Resources





POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
26 MID003782935

II. SITE NAME AND LOCATION

| | | | | | |
|---|----------------|--|--------------------|-------------------------------|--------------------|
| 01 SITE NAME (Legal, common, or descriptive name of site) DIAL TRUCKING | | 02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 14015 HAGBERRY ROAD | | | |
| 03 CITY Plymouth | 04 STATE MI | 05 ZIP CODE 48170 | 06 COUNTY WAYNE | 07 COUNTY CODE 163 | 08 CONG DIST 15 |
| 09 COORDINATES LATITUDE 42° 23' 06" - | | LONGITUDE 083° 26' 55" - | | NORTHVILLE QUAD - 7.5' SERIES | |
| 10 DIRECTIONS TO SITE (Starting from nearest public road) FROM EAST 96 CRT and turn right onto 10 mile ROAD. Follow 10 mile for roughly a mile then turn left onto HAGBERRY ROAD. Follow HAGBERRY south for approximately 6 miles. The site is on the southwest corner of the intersection of SUNDLEIGHT ROAD & HAGBERRY ROAD. | | | | | |

III. RESPONSIBLE PARTIES

| | | | | | |
|--|----------------|---|----------------------------|--|--|
| 01 OWNER (If known) DANA BURNS | | 02 STREET (Business, mailing, residential) 14015 HAGBERRY ROAD | | | |
| 03 CITY Plymouth | 04 STATE MI | 05 ZIP CODE 48170 | 06 TELEPHONE NUMBER () | | |
| 07 OPERATOR (If known and different from owner) METCOR METAL (?) | | 08 STREET (Business, mailing, residential) | | | |
| 09 CITY | 10 STATE | 11 ZIP CODE | 12 TELEPHONE NUMBER () | | |
| 13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN | | | | | |

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☐ A. RCRA 3001 DATE RECEIVED: ____/____/____ MONTH DAY YEAR ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ MONTH DAY YEAR ☒ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

| | | | | | |
|--|--|--|--|--|--|
| 01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 6-1-84 MONTH DAY YEAR <input type="checkbox"/> NO | | BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input checked="" type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____ | | | |
|--|--|--|--|--|--|

| | |
|---|---|
| 02 SITE STATUS (Check one) <input checked="" type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN | 03 YEARS OF OPERATION 1960s 1971 BEGINNING YEAR ENDING YEAR <input type="checkbox"/> UNKNOWN |
|---|---|

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
Municipal ; INDUSTRIAL WASTE

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION
ENVIRONMENT - Surface water, groundwater ; Soil contamination

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A. HIGH (Inspection required promptly) ☐ B. MEDIUM (Inspection required) ☒ C. LOW (Inspect on time available basis) ☐ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

| | | |
|--|---|---------------------------------------|
| 01 CONTACT BOB RATZ | 02 OF (Agency/Organization) WAYNE Co. Health Dept. | 03 TELEPHONE NUMBER (313) 326-4900 |
| 04 PERSON RESPONSIBLE FOR ASSESSMENT JEFF GATICA / STEVE CUNNINGHAM | 05 AGENCY MDNR | 06 ORGANIZATION ERD |
| | 07 TELEPHONE NUMBER (517) 373-4800 | 08 DATE 12/7/87 MONTH DAY YEAR |





POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
26 MID003782935

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☒ A. GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 77,776 04 NARRATIVE DESCRIPTION

A potential exist for groundwater contamination due to the alleged leachate contamination.

01 ☒ B. SURFACE WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☒ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 77,776 04 NARRATIVE DESCRIPTION

It is believed that surface water is contaminated due to the alleged visual citing in June 8 1984

01 ☐ C. CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

UNKNOWN

01 ☐ E. DIRECT CONTACT 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☒ F. CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☒ ALLEGED
03 AREA POTENTIALLY AFFECTED: 26 (Acres) 04 NARRATIVE DESCRIPTION

It is believed that soil has been contaminated due to the alleged leachate contamination.

01 ☐ G. DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ H. WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☒ I. POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

A potential exist for population injury due to the alleged surface water contamination.



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

26 MID03782935

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☒ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL ☐ ALLEGED

A potential exist for flora damage with the alleged leachate contamination.

01 ☒ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL ☐ ALLEGED

A potential exist for faunae damage with the alleged drain contamination by leachate.

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL ☐ ALLEGED

UNKNOWN

01 ☒ M. UNSTABLE CONTAINMENT OF WASTES
(Spills/runoff/standing liquids/leaking drums)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL ☒ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: 77,774 04 NARRATIVE DESCRIPTION

On a visual inspection (by the WARD) of the site in June 8 1984 it was believed that leachate was flowing into the Sly drain.

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL ☐ ALLEGED

N/A

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL ☐ ALLEGED

N/A

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL ☐ ALLEGED

N/A

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

N/A

III. TOTAL POPULATION POTENTIALLY AFFECTED: 77,774

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis reports)

MINE CO. Health Dept.
MDNR - LANSING - ERD FILE